



## Application for Hourly Employment

Today's Date \_\_\_\_\_

Completing an application does not imply you will be interviewed or hired, only that you will be given full consideration in competition with other applicants for a vacancy. Please answer all questions on the application and attach a resume if available. Please Print.

Typical part-time work at the library may include: Circulation desk – greet patrons, check books in and out, answer patron questions; Shelving – sorting and re-shelving materials; Audio Visual – help patrons locate AV materials; Tech Center – help patrons with photocopy machines, reader/printers, and computers; Help with library clerical projects on desk.

### PERSONAL INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone (Optional) \_\_\_\_\_

Email Address \_\_\_\_\_

Are you at least 18 years of age? Yes No If under 18 years of age, give birth date \_\_\_\_\_  
(Birth date is needed to comply with labor laws and work restrictions for minors under 18 years of age)

Are you a former KPL employee? Yes No Do you have the legal right to work in the US? Yes No

### EDUCATION AND TRAINING RECORD

Are you a high school graduate? Yes No Name/Location of high school \_\_\_\_\_

Do you have a GED or equivalent? Yes No Where did you receive your GED? \_\_\_\_\_

Are you attending school now? Yes No If yes, where \_\_\_\_\_

If attending school now, what is your expected date of graduation? \_\_\_\_\_

Please attach your class schedule for current and next semester if possible.

#### **Educational Institutions:**

Name of Technical School, College, or University	Location of School	Major, Minor, or Concentration	Degree or Certificate Earned/Year

#### **Licenses and/or Certificates which relate to the position for which you are applying:**

Type of License/Certificate	Issuing State/Agency	Number	Expiration Date
Drivers License			
Chauffeur's License			
CDL License			

## **AVAILABILITY**

Number of hours per week you can work \_\_\_\_\_ Please indicate below when you are available:

(20 hours maximum)

Morning Afternoon Evening Saturday Sunday Summer only

Do you work now? Yes No Would you continue if employed at the library? Yes No

Where would you prefer to work in the library? \_\_\_\_\_

Can you work at a branch location? Yes No

Which branch(es) could you work at? Eastwood Oshtemo Powell Washington Square

## **OTHER SKILLS/ASSETS**

Computer applications with which you are familiar: E-mail Yes No

Word Processing Yes No Data Entry Yes No Spread Sheets Yes No

Computer software you are familiar with: \_\_\_\_\_

List other information, knowledge, skills, abilities, and interests which add to your qualifications for employment: \_\_\_\_\_  
\_\_\_\_\_

List office machines you can operate: \_\_\_\_\_  
\_\_\_\_\_

Write a brief statement describing why you are qualified for library work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES (Not Relatives)** - The library will check your references. Work, volunteer, or school related references are preferred.

Name	Address	Telephone Number	Relationship

**Excluding minor traffic violations, have you ever been convicted of a felony or misdemeanor?**

Yes No Please explain \_\_\_\_\_  
\_\_\_\_\_

A prior conviction does not necessarily mean that you cannot be employed. Criminal convictions will be considered in relation to the position for which you have applied.

## **EMPLOYMENT HISTORY**

Start with your current or most recent job, including military duty. Include full-time, part-time, summer and temporary employment. Additional employment history may be attached.

Employer Name \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Position Title \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Description of duties, responsibilities, and equipment operated \_\_\_\_\_

May we contact this employer? Yes No

Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Employer Name \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Position Title \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Description of duties, responsibilities, and equipment operated \_\_\_\_\_

May we contact this employer? Yes No

Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Employer Name \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Position Title \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Description of duties, responsibilities, and equipment operated \_\_\_\_\_

May we contact this employer? Yes No

Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Employer Name \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Position Title \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Description of duties, responsibilities, and equipment operated \_\_\_\_\_

May we contact this employer? Yes No

Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_

I affirm the information provided on this application (and accompanying resume and notes, if any) is true and complete. **I understand and agree any misrepresentation or false statement on this application shall be considered cause for the rejection of this application or, in the event I become employed, immediate discharge.**

I authorize the Kalamazoo Public Library to investigate all statements contained in this application, including record of any former employers, police departments, and other references or sources concerning me. I authorize all references and sources to release this information without liability for damage incurred in giving it. I waive any written notice of the release of these records that may be required by state or federal law.

I understand that after receiving a conditional job offer, I may be required to successfully complete a medical examination including drug testing. I further agree, if hired, to submit to any future medical examinations (including drug and alcohol testing) that are justified by business necessity as required by Kalamazoo Public Library.

I understand employment in some positions at Kalamazoo Public Library is conditional upon review of my credit history. I authorize Kalamazoo Public Library to request and obtain such information if I am an applicant for one of these positions.

I understand employment at Kalamazoo Public Library is conditional upon review of my criminal conviction records. I authorize Kalamazoo Public Library to request and obtain from any criminal justice agency, an investigation and report to determine my prior criminal conviction(s), if any.

I understand I will be required to produce at the time of hire Employment Eligibility documents in compliance with the Immigration Reform and Control Act of 1986 (Employment Eligibility Form I-9).

If hired, I agree to comply with the applicable rules and regulations of Kalamazoo Public Library.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Thank you for your interest in employment at Kalamazoo Public Library.

Return this application to:

**Kalamazoo Public Library**  
**Administrative Services – 3<sup>rd</sup> Floor**  
**315 S. Rose St.**  
**Kalamazoo, MI. 49007**  
**Fax: 269.342.8324**

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